

Application No.: 10/530,350



Docket No.: M1885.0052/P052

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Roberto Baruchello et al.

Application No.: 10/530,350

Confirmation No.: 7761

Filed: April 6, 2005

Art Unit: 2859

For: TOUCH PROBE COMPRISING A SWITCH
WITH CONTACTS PROTECTED BY INERT
GAS

Examiner: Yaritza Guadalupe

COMMENTS ON STATEMENT OF REASONS FOR ALLOWANCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicants have reviewed the Examiner's Statement of Reasons for Allowance and wish to submit the following remarks. The Statement paraphrases several limitations from independent claim 1 as reasons for allowance of claims 1-11. Applicants wish to point out that independent claim 1 contains other limitations which, in combination with the limitations paraphrased in the Statement, render claim 1 allowable. Moreover, dependent claims 2-11 recite limitations which, in combination with their base claim, render the dependent claims allowable.

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Otherwise, Applicants agree with the Statement that the allowed claims distinguish over the prior art.

Dated: December 7, 2006

Respectfully submitted,

By 

Thomas J. D'Amico

Registration No.: 28,371

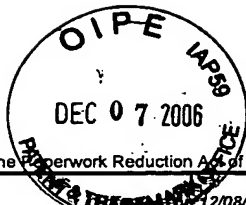
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PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818),
12/08/2004.**FEE TRANSMITTAL**
For FY 2006☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 1,700.00**Complete if Known**

| | |
|----------------------|------------------------|
| Application Number | 10/530,350-Conf. #7761 |
| Filing Date | April 6, 2005 |
| First Named Inventor | Roberto Baruchello |
| Examiner Name | Y. Guadalupe |
| Art Unit | 2859 |
| Attorney Docket No. | M1885.0052/P052 |

METHOD OF PAYMENT (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: **04-1073** Deposit Account Name: **Dickstein Shapiro LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | Fee (\$) | Small Entity | Fee (\$) | Small Entity | Fee (\$) | Small Entity | Fees Paid (\$) |
|------------------|----------|--------------|----------|--------------|----------|--------------|----------------|
| | | Fee (\$) | | Fee (\$) | | Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES**Fee Description**

| | Small Entity | Fee (\$) |
|--|--------------|----------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|----------|---------------|
| 11 | - 20 = | x | = |

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|
| 1 | - 3 = | x | = |

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims

| Fee (\$) | Fee Paid (\$) |
|----------|---------------|
|----------|---------------|

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 = | /50 | (round up to a whole number) x | = | |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

| | |
|---|----------|
| Other (e.g., late filing surcharge): 1501 Utility issue fee | 1,400.00 |
| 1504 Publication fee for early, voluntary, or normal ... | 300.00 |

SUBMITTED BY

| | | | | | |
|-------------------|-------------------|-----------------------------------|------------------|-----------|----------------|
| Signature | | Registration No. (Attorney/Agent) | 28,371 | Telephone | (202) 420-2232 |
| Name (Print/Type) | Thomas J. D'Amico | Date | December 7, 2006 | | |